

STATE OF NEBRASKA

Department of Banking & Finance

NOTICE OF CHANGE OF CONTROL by Gift, Inheritance, or Collection of Debt

General Information

Review the general guidelines listed below before completing the attached form.

INTRODUCTION

No individual, corporation, partnership, trust, association, joint venture, pool, syndicate, sole proprietorship, unincorporated organization, or any other form of entity acting personally or as an agent shall acquire shares of a state-chartered bank or industrial loan and investment company, through collection of a debt previously contracted in good faith or through inheritance or a bona fide gift, without notifying the Department of Banking and Finance within ten days after the acquisition. Such notice is required pursuant to Neb. Rev. Stat. sections 8-1501 to 8-1505.

NOTICE CONTENT REQUIREMENTS

Section 8-1504 provides the statutory basis for the contents of the attached notice. In order to be properly filed in accordance with sections 8-1501 to 8-1505, a notice must be substantially complete and responsive to every item. Attach additional sheets as necessary. If the answer to any question is "no", "none", or "not applicable", so indicate. Contact the Legal Division of the Department if there are questions concerning the sufficiency of answers.

DEPARTMENTAL PROCEDURE

When a substantially completed notice is received by the Department, the Director will issue a letter of acknowledgement to the acquiring party or designated correspondent indicating the date of receipt and compliance with the notice provision.

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NOTICE OF CHANGE OF CONTROL
BY GIFT, INHERITANCE, OR COLLECTION OF DEBT

1. General Information

- a. This transaction affects the shares of: ☐ Financial Institution
☐ Financial Institution's Holding Company
☐ Both

- b. Name and address of financial institution affected by this transaction:

Name

Street Address

City

State

Zip Code

- c. Name, address, telephone number and fax number of the institution's holding company, if any:

Name

Street Address

City

State

Zip Code

Telephone Number

Fax Number

- d. Name, address, telephone and fax number of person to whom inquires concerning this notice may be directed:

Name

Street Address

City

State

Zip Code

Telephone Number

Fax Number

2. Type of transaction:

- ☐ Gift
☐ Inheritance
☐ Collection of Debt

3. Type of shares being acquired: ☐ Preferred ☐ Common
- a. At the institution to be acquired, the number of voting shares authorized: _____
- b. Total number of voting shares outstanding: _____
Existing *Pro forma*
- c. Number of voting shares involved in this transaction: _____

4. Attach any documentation which will substantiate that the transaction falls under one of the categories listed in Item #2. Such documentation will be kept confidential.

5. Provide the following:

Name and address of each acquiror/transferee	Number of shares now owned, controlled, or held	Number of shares to be acquired	Number of shares after completion
TOTAL			
Total as a percent of shares outstanding	%	%	%

Name of each seller/transferor	Number of shares now owned, controlled, or held	Number of shares to be sold/transferred	Number of shares after completion
TOTAL			
Total as a percent of shares outstanding	%	%	%

6. Describe in detail any plans or proposals that any acquiror may have to liquidate the financial institution or holding company to be acquired, to sell its assets, to merge it with any company, or to make any significant change in its business strategy or corporate structure.

CERTIFICATION

I certify that the information contained in this notice been examined carefully by me and is true, correct, and complete, and is current as of the date of this submission. I acknowledge that any misrepresentation or omission of a material fact constitutes fraud and may subject me to legal sanctions.

Signed this _____ day of _____, _____.

Signature

Print or type name

Title (If applicable)

Name of Firm (If applicable)